

10000 NE 7th Avenue, Suite 400 Vancouver, WA 98685 (360) 693-1630

Divorce Intake

Name (first, middle, last)				Date and Place of Birth		Social Security Number (s)
Previous (maiden) name			Race			
Address (street, city, stat	te, zip)					
E-mail address:						
Home Phone Work Phone C			Cell Phone Driver's License Number			
			SPOUSE'S II	NFORM.	ATION	
Name (first, middle, last)				Date and	d Place of Birth	Social Security Number (s)
Previous (maiden) name			Race			
Address (street, city, stat	te, zip)					
E-mail address:						
Home Phone Work Phone		Cell Phone Driver's License Number				
DATE OF MARRIA	GE		PLACE OF M.	ARRIAG	E	DATE OF SEPARATION
					ı	
			CHILDREN FR	OM MA	RRIAGE	
Name		Date of Birth	/ Race			Social Security Number
		CHILDE	REN FROM OT	HER RE	LATIONSHIPS	
Name		Date of Birth				Social Security Number
. Tamo		Date of Birth	1100			



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	EMPLO)	MENT INFORMAT	ION						
	Client			Spouse					
Employer									
Address									
Phone Number									
Position									
Rate of Pay									
Length of Employment									
ASSETS									
	Value	Owing		Net					
Home									
Other Real Property									
Checking Account									
Savings Account									
Investments									
Retirement - You									
Retirement - Spouse									
vehicle - You									
Vehicle - Spouse									
Other									
Other									
		LIABILITIES							
Creditor		Balar	nce Owing	Monthly Payment					
	ADDIT	TONAL QUESTION	9						
ADDITIONAL QUESTIONS Do you have a will or community Property agreement? Yes No If yes, briefly explain:									
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Do you have a prenuptial agreement? Yes No If yes, briefly explain:
Do you belong to any social networking websites as Facebook or Instagram? Yes No If yes, what site(s):
Has an attorney represented you in this legal action before your consultation with our firm? Yes No If yes, briefly explain:
Tras all attorney represented you in this regaraction before your consultation with our limit: res No in yes, briefly explain.
Do you have an outstanding balance with any attorney who currently represents you or previously represented you?
Yes No If yes, briefly explain:
Are any legal actions pending which are related to the legal action you are consulting with our firm about? Yes No
If so, please provide the case name, case number and county where the action exists.
Please bring copies of the following documents to your initial consultation:
1.

Privacy Notice

The law firm is required to maintain client confidentiality pursuant to the Rules of Professional Conduct administered by the Washington State Bar Association. If you have any question about how we maintain confidentiality, ask Juliet Laycoe.

Representation Not Guaranteed:

An initial consultation with the law firm does not guarantee that the law firm will accept your case or represent you in your legal matter. If the law firm agrees to represent you, the agreement will be pursuant to a written free agreement or confirmed by an engagement letter.